		A			В		
			As most recently reported or adjuste		Corrected amount		
14	Write the amounts from Line 13	14		14			
Step	5: Figure your income or loss						
15	State, municipal, and other interest income excluded from Line 14.	15		15			
16	Illinois replacement tax deducted in arriving at Line 14.	16		16			
17	Illinois Bonus Depreciation addition (Form IL-4562).	17		17			
18	Related-Party Expenses addition (Schedule 80/20).	18		18			
19	Distributive share of additions (Schedule K-1-P or K-1-T).	19		19			
20							
	replacement tax (Schedule B).						
	Other additions (Schedule M for businesses).		_				
22	Add Lines 14 through 21. This is your total income or loss.	22		22			
Step	6: Figure your Illinois base income or net loss						
23	Interest income from U.S. Treasury and exempt federal obligations.	23		23			
24	Share of income distributable to a shareholder subject to		·		•		
	replacement tax (Schedule B).	24	_	24			
25	Expenses incurred in producing certain federally tax-exempt income or credits.	25		25			
26	Enterprise Zone or River Edge Redevelopment Zone dividend subtraction (Schedule 1299-A).	26		26			
27	Enterprise Zone or River Edge Redevelopment Zone interest subtraction (Schedule 1299-A).	27		27			
28	High Impact Business dividend subtraction (Schedule 1299-A).	28		28			
29	High Impact Business interest subtraction (Schedule 1299-A).						
30	Contribution subtraction (Schedule 1299-A).						
31	Illinois Bonus Depreciation subtraction (Form IL-4562).						
32	, ,						
33	Distributive share of subtractions (Schedules K-1-P or K-1-T).		<u> </u> _		<u> </u>		
	Other subtractions (Schedule M for businesses).						
	Total subtractions. Add Lines 23 through 34.	36		35 36			
30	Base income or net loss. Subtract Line 35 from Line 22. If the amount on Line 36 is derived inside and outside Illinois,		omplete Step 7	აი . Otherwise, go	to Step 8.		
<u></u>	·						
•	7: Figure your base income allocable to Illinois						
	Nonbusiness income or loss (Schedule NB).	37	_	37			
38	Non-unitary partnership business income or loss included in Line 36.	38		38	ı		
30	Add Lines 37 and 38.		<u> </u>				
	Business income or loss. Subtract Line 39 from Line 36.			33 40			
41	Total sales everywhere (this amount cannot be negative).						
42							
	Apportionment Factor. Divide Line 42 by Line 41.						
	Business income or loss apportionable to Illinois. Multiply Line 40 by Line 43.	44	1	44			
45	Nonbusiness income or loss allocable to Illinois (Sch. NB).						
	Non-unitary partnership business income or loss apportionable to Illinois.	46		46	<u> </u>		
47	Base income or net loss allocable to Illinois.	•	l				
	Add Lines 44 through 46.	41		4/			

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		А		В
		As most recently reported or adjusted	Corre	cted amount
Step 8: Figure your net income				
48 Base income or net loss from Line 36 or Line 47.49 Illinois net loss deduction (Schedule NLD).	48 _		48	l
If Line 48 is zero or a negative amount, write "0."	49 _		49	
50 Net income. Subtract Line 49 from Line 48.	50 _		50	
Step 9: Figure your net replacement tax				
51 Replacement Tax. Multiply Line 50 by 1.5% (.015).	51 _		51	
52 Recapture of investment credits (Schedule 4255).	52 _		52	
53 Replacement Tax before investment credits. Add Lines 51 and 52.			53	
54 Investment credits (Form IL-477).			54	
55 Net replacement tax. Subtract Line 54 from Line 53.				
If negative, write "0."	55 _		55	
Step 10: Figure your refund or balance due				
56 Payments				
a Credit from prior year overpayment.	a _			
b Form IL-505-B (extension) payment.	b _			
Total payments. Add Lines 56a and 56b.		•	56	1
57 Tax paid with original return (do not include penalties and interest).			57	
58 Subsequent tax payments made since the original return.		58		
		59 59		
. , ,				
60 Total amount previously refunded and/or credited for the year being a		60		
61 Net tax paid. Subtract Line 60 from Line 59.		61	<u> </u>	
62 Refund. Subtract Line 55 from Line 61.		62		
63 Tax due. Subtract Line 61 from Line 55.			63	
64 Penalty (See instructions.)			64	
65 Interest (See instructions.)			65	
66 Total balance due. Add Lines 63 through 65.			66	
► Make your check payable to "Illinoi Special Note → Write the amount of your payment or			provided.	
Step 11: Sign here				
Under penalties of perjury, I state that I have examined this return	and, to t	he best of my knowled	dge, it is true, corre	ect, and comple
Signature of authorized of cer Date	/	Title	()	
Signature of authorized of cer Date	,	Tille	Phone	
Signature of preparer Date	/ }	Preparer's Social Secu	rity Number or rm's FE	IN
			()	
Preparer rm's name (or yours, if self-employed) Address			Phone	

► Mail this return to: Illinois Department of Revenue, P.O. Box 19016, Spring eld, IL 62794-9016 ◀